

Missourians' Views of Key Health Issues

Key Findings of Statewide Opinion Research April 2024





Survey Methodology

| Dates | March 2-18, 2024 | | | | |
|--------------------------|--|--|--|--|--|
| Survey Type | Dual-mode resident survey | | | | |
| Research Population | Adult residents of Missouri | | | | |
| Total Interviews | 1,719 statewide including 1,519 in the MFH service area, 200 in the remainder of the state and 345 among BIPOC Missourians | | | | |
| Margin of Sampling Error | ±2.4% at the 95% Confidence Level | | | | |
| Contact Methods | Telephone Email Text Calls Invitations | | | | |
| Data Collection Modes | Telephone Interviews Online Interviews | | | | |
| Languages | English and Spanish | | | | |



(Note: Not All Results Will Sum to 100% Due to Rounding)

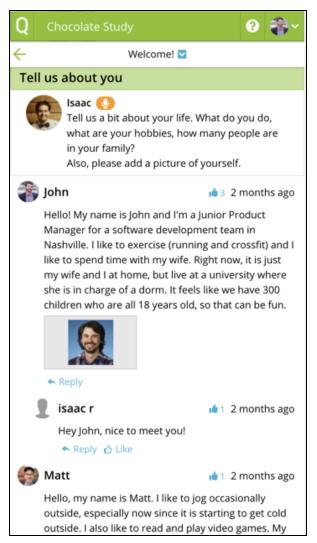
Focus Group Approach

- Eight focus groups were conducted among Missouri residents in November 2023.
- Each session lasted approximately two hours and consisted of a small group discussion of up to 10 people.
- Groups were segmented by geography and by gender or ethnicity.

| Group Date | Group Location | Group Profile |
|-------------------|----------------|------------------------|
| November 13, 2023 | St. Louis | Mixed Gender |
| November 13, 2023 | St. Louis | Black/African American |
| November 14, 2023 | Hannibal | Women |
| November 14, 2023 | Hannibal | Men |
| November 15, 2023 | Cape Girardeau | BIPOC |
| November 15, 2023 | Cape Girardeau | Mixed Gender |
| November 16, 2023 | Springfield | Women |
| November 16, 2023 | Springfield | Men |



Online Discussion Group Approach



- The session took place online from January 9-11, 2024, with questions posted twice a day for three days.
- Respondents could reply at their leisure, including responding to probes from the moderator.
- The session included 25 residents from small towns and rural areas in Missouri.
- Respondents represented a mix of ages, genders, ethnicities, parties, and political ideologies

Sample Interface



Seven Key Takeaways from the Research

- 1. The top concerns for state residents include the cost of living, the cost of healthcare, drug and alcohol abuse and mental health.
- 2. Despite these concerns, most describe their communities in positive terms and **feel a sense of belonging** particularly in their church/faith community.
- 3. Only **one-quarter of Missourians report living comfortably and saving**; residents view the ability to afford day-to-day expenses as a much betterer indicator of the strength of the economy than the stock market or other broader economic factors.
- 4. Residents are far more likely to see **not having enough good jobs as a key problem**, as opposed to not having **enough** jobs for people who want one.
- 5. Missourians view good jobs, low levels of crime, and treating people with respect as key contributors to community health; and they also widely agree that community conditions have a significant effect on personal health.
- 6. At the same time, while they widely acknowledge the influence of societal factors, Missourians also believe that **individuals have control over their own health**.
- 7. Two-thirds say it is **easy to obtain access to physical healthcare**; **far fewer say accessing mental healthcare is easy.** Communities that are historically marginalized like those with low-incomes, LGBTQ+ and those living with a disability are more likely to experience difficulty in getting care.

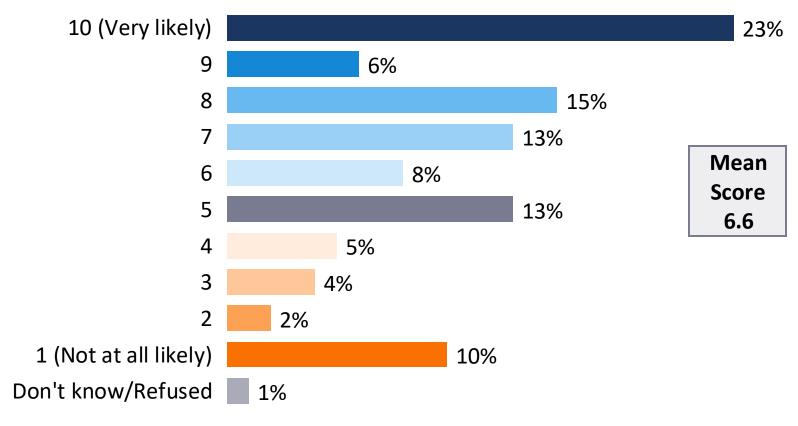




Views of Life in Missouri

Most residents of Missouri are likely to recommend it as a place to live.

How likely would you be to recommend Missouri to a friend or family member as a place to live? Please use a scale of 1 to 10, where a 1 means not at all likely and a 10 means very likely.





Public safety, cost of living and the economy are seen as the top issues in the state.

In a few words of your own, what is the most important issue facing Missouri right now?

(Open-ended)





Verbatim Comments Describing the Top Issues in the State

It is violence like homicide, murder, running red lights and running people over.

I would say worker's rights.
They have the right to organize unions.

It is about immigration. It is illegal immigration and drugs. There are a lot of users on the street. It is dangerous in Missouri right now.

It is the economy. I would say the cost of living and food to eat. It is skyrocketing. Drug use, ease of access to drugs for those in school and young adults.

I would say women's rights or health care rights, specifically safe access to abortion and birth control rights.

Healthcare affordability. I believe that's an issue for the US as a whole. But Missouri could do better for its people.

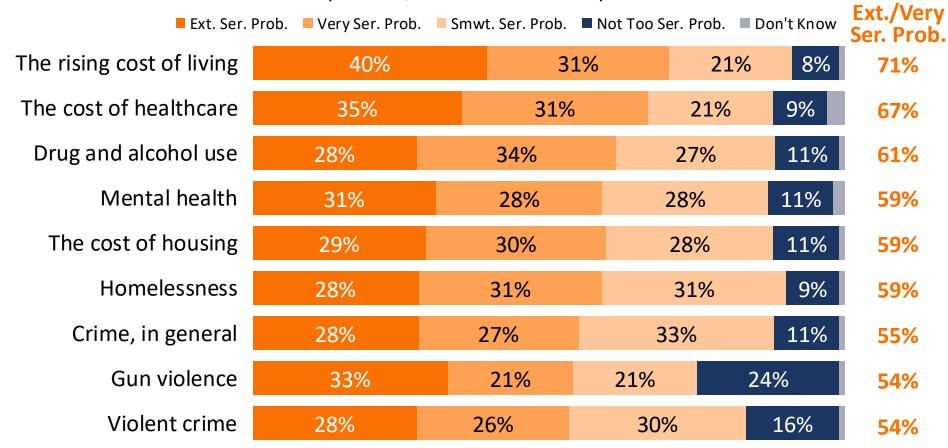
It is inflation because the price of everything is going up, and the value of my dollars spent is giving me less and less.

The housing costs...it is really expensive for anybody to rent a place or buy a home. They need to build more housing stock.



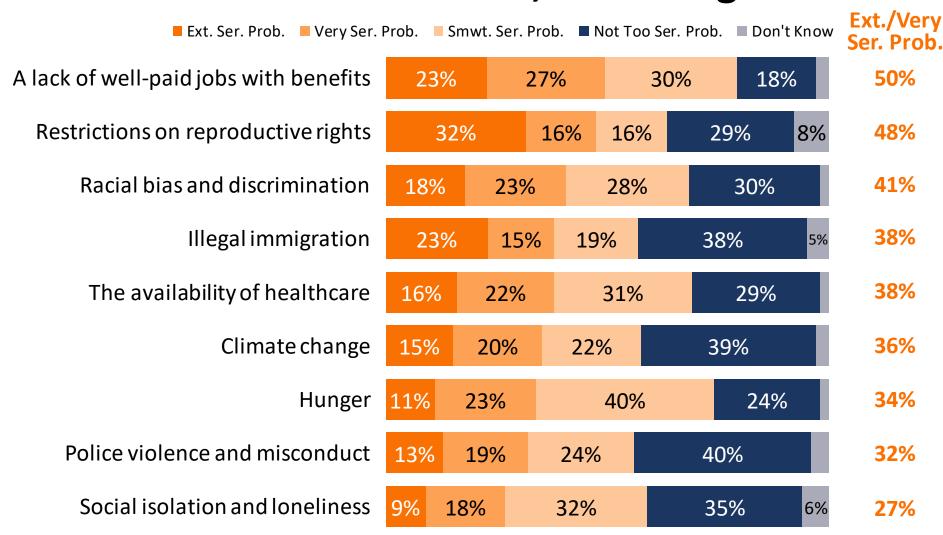
The rising cost of living and the cost of healthcare are the top problems facing the state.

I'd like to read you some problems facing Missouri that people have mentioned.
Please tell me whether you think it is an extremely serious problem, a very serious problem, somewhat serious problem, or not too serious a problem in Missouri.





Issues that are typically politically polarizing are seen as less serious, on average.





Q11. I'd like to read you some problems facing Missouri that people have mentioned. Please tell me whether you think it is an extremely serious problem, a very serious problem, somewhat serious problem, or not too serious a problem in Missouri. Split Sample

Black Missourians are especially concerned about gun violence and crime.

| | | Extremely/ | Very Serious Problen | า | |
|--|------------------|----------------|---------------------------|-----------|--|
| Problem | ΔIJ | Race/Ethnicity | | | |
| Troblem | All Residents | White | Black/African American | All BIPOC | |
| The rising cost of living | 71% | 71% | 78% | 71% | |
| The cost of healthcare | 67% | 69% | 63% | 59% | |
| Drug and alcohol use | 61% | 60% | 72% | 68% | |
| Mental health | 59% | 57% | 76% | 67% | |
| The cost of housing | 59% | 58% | 67% | 64% | |
| Homelessness | 59% | 58% | 71% | 61% | |
| Crime, in general | 55% | 53% | 80% | 61% | |
| Gun violence | 54% | 50% | 83% | 68% | |
| Violent crime | 54% | 50% | 77% | 67% | |
| A lack of well-paid jobs with benefits | 50% | 48% | 61% | 57% | |
| Restrictions on reproductive rights | 48% | 48% | 60% | 48% | |
| Racial bias and discrimination | 41% | 36% | 71% | 58% | |
| Illegal immigration | 38% | 39% | 30% | 36% | |
| The availability of healthcare | 38% | 38% | 44% | 38% | |
| Climate change | 36% | 38% | 32% | 28% | |
| Hunger | 34% | 32% | 41% | 41% | |
| Police violence and misconduct | 32% | 29% | 60% | 41% | |
| Social isolation and loneliness | 27% | 25% | 33% | 35% | |

RESEARCHSTRATEGY

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Democrats are especially concerned about guns and reproductive rights; Republicans with cost of living and illegal immigration.

| | Extremely/Very Serious Problem | | | | | |
|--|--------------------------------|-----------|-----------------|-------------|--|--|
| Problem | All | | Political Party | | | |
| | Residents | Democrats | Independents | Republicans | | |
| The rising cost of living | 71% | 59% | 71% | 82% | | |
| The cost of healthcare | 67% | 72% | 62% | 65% | | |
| Drug and alcohol use | 61% | 61% | 66% | 59% | | |
| Mental health | 59% | 69% | 60% | 50% | | |
| The cost of housing | 59% | 60% | 58% | 59% | | |
| Homelessness | 59% | 68% | 62 % | 48% | | |
| Crime, in general | 55% | 50% | 55% | 60% | | |
| Gun violence | 54% | 83% | 52% | 30% | | |
| Violent crime | 54% | 61% | 59% | 45% | | |
| A lack of well-paid jobs with benefits | 50% | 54% | 55% | 43% | | |
| Restrictions on reproductive rights | 48% | 81% | 48% | 18% | | |
| Racial bias and discrimination | 41% | 66% | 38% | 21% | | |
| Illegal immigration | 38% | 12% | 37% | 62% | | |
| The availability of healthcare | 38% | 49% | 38% | 29% | | |
| Climate change | 36% | 65% | 38% | 8% | | |
| Hunger | 34% | 43% | 34% | 27% | | |
| Police violence and misconduct | 32% | 48% | 35% | 15% | | |
| Social isolation and loneliness | 27% | 26% | 33% | 24% | | |



Q11. I'd like to read you some problems facing Missouri that people have mentioned. Please tell me whether you think it is an extremely serious problem, a very serious problem, somewhat serious problem, or not too serious a problem in Missouri. Split Sample

Respondents in the MFH service area rank problems similarly to those in other areas of the state.

| Jiiiiidiiy to tiiose | othici ai c | | a to: | |
|--|---------------|---------------------|-------------------------|--|
| | Extrem | nely/Very Serious P | roblem | |
| Problem | All Residents | Region | | |
| | All Residents | MFH Area | Balance of State | |
| The rising cost of living | 71% | 71% | 73% | |
| The cost of healthcare | 67% | 66% | 71% | |
| Drug and alcohol use | 61% | 62% | 59% | |
| Mental health | 59% | 59% | 61% | |
| The cost of housing | 59% | 59% | 60% | |
| Homelessness | 59% | 56% | 68% | |
| Crime, in general | 55% | 56% | 53% | |
| Gun violence | 54% | 51% | 65% | |
| Violent crime | 54% | 55% | 51% | |
| A lack of well-paid jobs with benefits | 50% | 49% | 52% | |
| Restrictions on reproductive rights | 48% | 47% | 51% | |
| Racial bias and discrimination | 41% | 39% | 47% | |
| Illegal immigration | 38% | 39% | 36% | |
| The availability of healthcare | 38% | 39% | 34% | |
| Climate change | 36% | 34% | 43% | |
| Hunger | 34% | 35% | 32% | |
| Police violence and misconduct | 32% | 31% | 35% | |
| Social isolation and loneliness | 27% | 26% | 30% | |



Q11. I'd like to read you some problems facing Missouri that people have mentioned. Please tell me whether you think it is an extremely serious problem, a very serious problem, somewhat serious problem, or not too serious a problem in Missouri. Split Sample

Consistent with the survey findings, focus group and QualBoard respondents worried most about the cost of living and of housing.

- In addition to the high cost of living and of housing, participants worried about homelessness, mental health, drug addiction and crime.
- Focus group participants, who were predominantly living in urban areas of the state were more pessimistic than optimistic about its direction.
- QualBoard participants, who were primarily from small town and rural areas, were also divided on the direction of the state; those who felt positively attributed it to a strong and growing economy.

Hannibal Male: If you buy your own home, first of all the cost of houses have gone up like double, in some places triple, it depends on what neighborhood you're moving into.

St. Louis Female: I have 10 children. My husband has a decent job, but we live paycheck to paycheck. It wasn't always so bad, but it's just getting really hard to buy food and things. We don't live extravagantly. I'm just trying to figure out why that is.

QualBoard Female: Chaos. The fentanyl overdose crisis has been on the rise...really bad.





Missourians' Perceptions of Their Communities

Missourians most often describe their community as safe and welcoming, but also as impoverished and rural.

If you had to describe your community in two or three words or phrases, which would you choose?

(Open-ended)





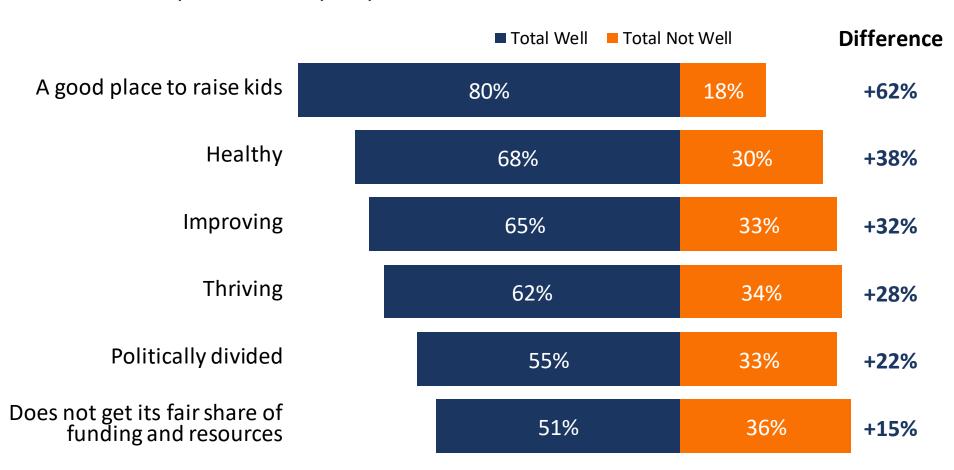
The word "safe" was volunteered more than any other.





Missourians widely view their communities as "a good place to raise kids."

I'm going to read you a list of words and phrases; please tell me how well you think it describes your community: very well, somewhat well, not too well, or not well at all.





White respondents offer more broadly positive evaluations of their communities.

| | Total Well | | | | | | |
|--|------------|-------|----------------|-------|-----|--------|--|
| Word/Phrase | All | | Race/Ethnicity | | | Gender | |
| | Residents | White | Black | BIPOC | Men | Women | |
| A good place to raise kids | 80% | 83% | 63% | 69% | 83% | 77% | |
| Healthy | 68% | 71% | 60% | 59% | 74% | 62% | |
| Improving | 65% | 65% | 59% | 61% | 68% | 62% | |
| Thriving | 62% | 65% | 53% | 52% | 67% | 60% | |
| Politically divided | 55% | 56% | 55% | 55% | 57% | 54% | |
| Does not get its fair share of funding and resources | 51% | 52% | 47% | 48% | 50% | 53% | |



Democrats are more likely to view their community as "politically divided" than are independents and Republicans.

| | Total Well | | | | | |
|--|------------|-------|-------|--------|-------------|------------------|
| Word/Phrase | All | | Party | Region | | |
| | Residents | Dems. | Inds. | Reps. | MFH Area | Balance of State |
| A good place to raise kids | 80% | 77% | 73% | 88% | 79% | 85% |
| Healthy | 68% | 66% | 62% | 73% | 67% | 70% |
| Improving | 65% | 64% | 61% | 67% | 64% | 67% |
| Thriving | 62% | 59% | 59% | 67% | 62% | 62% |
| Politically divided | 55% | 65% | 51% | 50% | 55% | 57% |
| Does not get its fair share of funding and resources | 51% | 54% | 49% | 50% | 50% | 54% |



Q13. I'm going to read you a list of words and phrases; please tell me how well you think it describes your community: very well, somewhat well, not too well, or not well at all.

Many qualitative participants felt a sense of belonging in public places, including church and school, but several also experienced exclusion and discrimination in their communities.

- Participants in focus groups felt that community connections were eroding over time.
- QualBoard participants attributed the change in community connections to people increasingly spending time online.
- Some who felt excluded in their community pointed to having liberal/ Democratic political views or felt excluded because of their LGBTQ+ identity.
- A few noted they felt excluded either because they hadn't lived in the area long-term, or, in contrast, because everyone in their town knew their history.
- A number of participants in qualitative sessions had experienced outright discrimination because of their race, sexual orientation, or weight.

cell phone, but I bet you they don't know how to phone their neighbors; no one can text their neighbors.

QualBoard Female: Two places I feel like I physically belong are my church and the public library. My church is very welcoming and even though most of the people are senior citizens, I at 30 years old still feel very loved and valued.

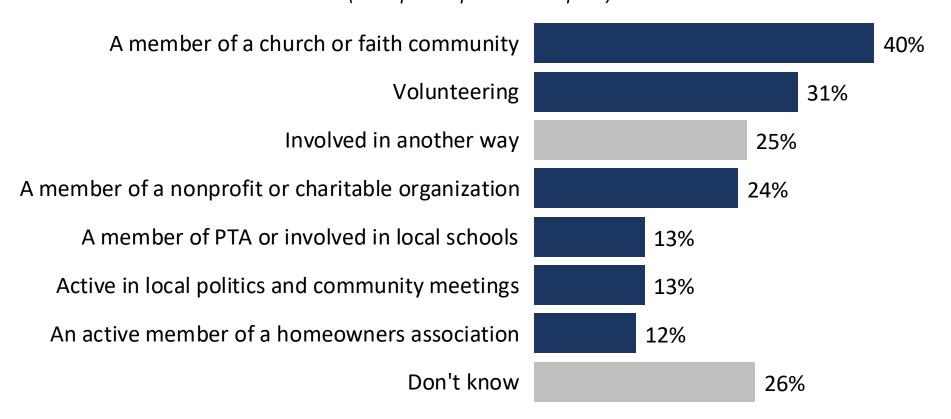
QualBoard Male: I've been called all the gay slurs; I really never feel safe here.



Missourians report being engaged in their communities in a variety of ways, are most notably as a member of a church or faith community and through volunteering.

Are you involved in your community in any of the following ways:

(Multiple Responses Accepted)



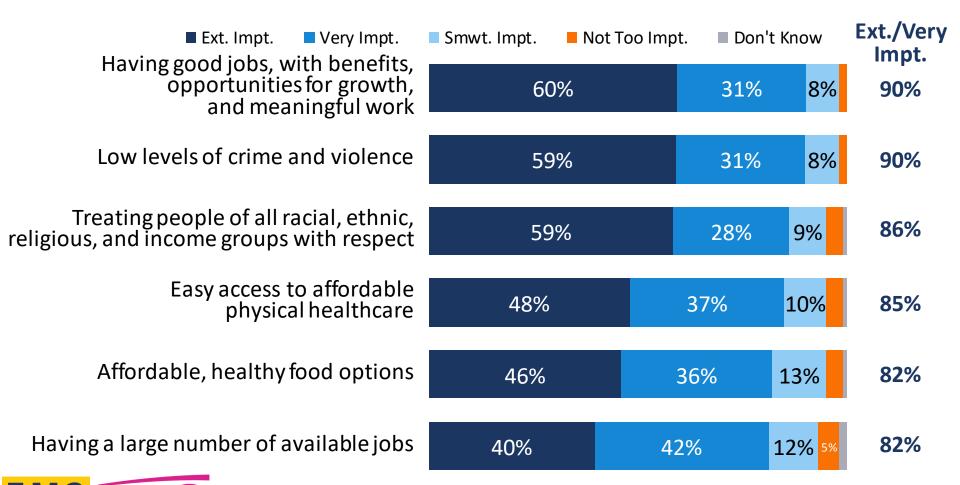




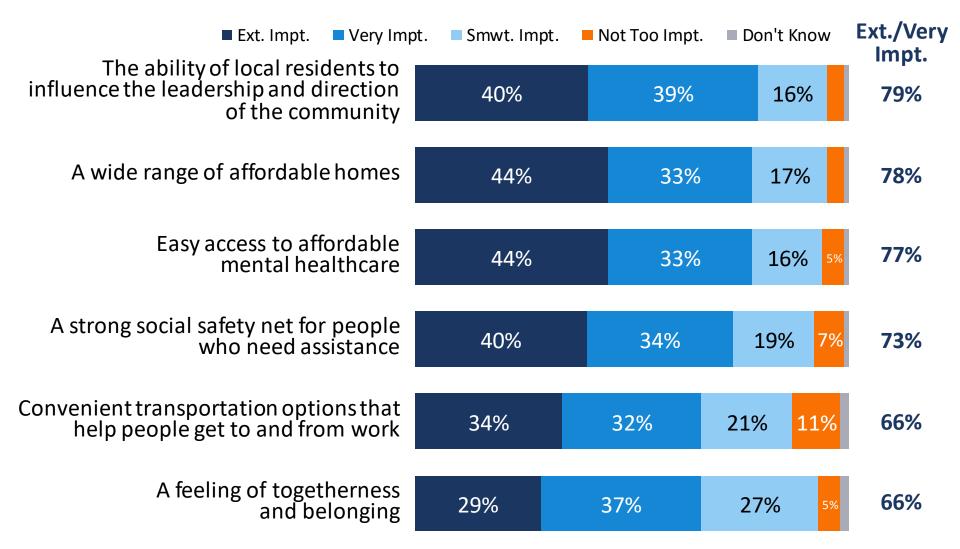
Factors That Lead to Healthy Communities

Missourians recognize a wide variety of factors that contribute to making a community healthy.

Here is a list of factors that may contribute to making a community healthy. Please indicate whether you consider it to be extremely, very, somewhat, or not too important to making a community healthy.



Influencing their local community, affordable homes, affordable mental health and a safety net are also highly important.





Q14. Here is a list of factors that may contribute to making a community healthy. Please indicate whether you consider it to be extremely, very, somewhat, or not too important to making a community healthy. Split Sample

Respondents rank the factors in a similar order regardless of their race and ethnicity.

| | Extremely/Very Important | | | | |
|---|--------------------------|----------------|----------------------|--------------|--|
| Factor | All | Race/Ethnicity | | | |
| | Residents | | African Americans | All BIPOC | |
| Having good jobs, with benefits, opportunities for growth, and meaningful work | 90% | 89% | 98% | 95% | |
| Low levels of crime and violence | 90% | 91% | 90% | 88% | |
| Treating people of all racial, ethnic, religious, and income groups with respect | 86% | 87% | 88% | 86% | |
| Easy access to affordable physical healthcare | 85% | 86% | 85% | 82% | |
| Affordable, healthy food options | 82% | 82% | 86% | 82% | |
| Having a large number of available jobs | 82% | 80% | 89% | 85% | |
| The ability of local residents to influence the leadership and direction of the community | 79% | 79% | 80% | 79% | |
| A wide range of affordable homes | 78% | 77% | 84% | 80% | |
| Easy access to affordable mental healthcare | 77% | 76% | 86% | 83% | |
| A strong social safety net for people who need assistance | 73% | 72% | 88% | 80% | |
| Convenient transportation options that help people get to and from work | 66% | 65% | 78% | 69% | |
| A feeling of togetherness and belonging | 66% | 65% | 72% | 69% | |



Q14. Here is a list of factors that may contribute to making a community healthy. Please indicate whether you consider it to be extremely, very, somewhat, or not too important to making a community healthy. Split Sample

Democrats assign more importance to many of the factors than independents and Republicans do.

| | Extremely/Very Important | | | |
|---|--------------------------|-------|-------|-------|
| Factor | All | Party | | |
| | Residents | Dems. | Inds. | Reps. |
| Having good jobs, with benefits, opportunities for growth, and meaningful work | 90% | 94% | 88% | 89% |
| Low levels of crime and violence | 90% | 92% | 86% | 91% |
| Treating people of all racial, ethnic, religious, and income groups with respect | 86% | 94% | 84% | 82% |
| Easy access to affordable physical healthcare | 85% | 90% | 80% | 83% |
| Affordable, healthy food options | 82% | 89% | 86% | 73% |
| Having a large number of available jobs | 82% | 83% | 81% | 81% |
| The ability of local residents to influence the leadership and direction of the community | 79% | 82% | 77% | 77% |
| A wide range of affordable homes | 78% | 86% | 81% | 69% |
| Easy access to affordable mental healthcare | 77% | 90% | 76% | 67% |
| A strong social safety net for people who need assistance | 73% | 90% | 72% | 60% |
| Convenient transportation options that help people get to and from work | 66% | 79% | 69% | 52% |
| A feeling of togetherness and belonging | 66% | 64% | 72% | 63% |



Q14. Here is a list of factors that may contribute to making a community healthy. Please indicate whether you consider it to be extremely, very, somewhat, or not too important to making a community healthy. Split Sample

Participants in the qualitative sessions ranked the factors in a similar order.

| Factor | Number of Participants Who Chose "Extremely Important" | | |
|---|--|---------------------|--|
| | QualBoards | Focus Groups | |
| Treating people of all racial, ethnic, religious, and income groups with respect | 21 | 59 | |
| Low levels of crime and violence | 18 | 49 | |
| Having good jobs with benefits, opportunities for growth, and meaningful work | 16 | 49 | |
| Easy access to affordable physical healthcare | 15 | 45 | |
| Easy access to affordable mental healthcare | 15 | 40 | |
| The ability of local residents to influence the leadership and direction of the community | 14 | 29 | |
| Convenient transportation options that help people get to and from work | 14 | 27 | |
| A strong social safety net for people who need assistance | 13 | 39 | |
| A wide range of affordable homes | 11 | 29 | |
| Affordable, healthy food options | 11 | 35 | |
| A feeling of togetherness and belonging | 11 | 27 | |
| Having a large number of available jobs | 10 | 25 | |



Next, here is a list of factors that may or may not make a community healthy. For each one please indicate whether you consider it to be extremely, very, somewhat, or not important to making a community healthy. Then write a few words explaining your choices.

Participants in the qualitative sessions agreed that a wide range of community factors influence its health.

QualBoard Female: Community involvementwhether you're part of a club, church, organization, or just attend city council meetings, it all helps to create stronger community ties and involvement, and therefore leads to a stronger community. Online communities don't count.

QualBoard Male: A healthy community consists of many different things: good-paying jobs, affordable housing and education. And neighbors that look out for each other and help each other, not only in times of disaster.

St. Louis Female: Low levels of crime and violence. Violence is just out of hand. It's crazy. People have just, excuse me, but they've done lost their minds. I'll say it again. It's sad. Everybody is on the edge, ready to jump off, so to speak.

Springfield Male: Your opinion and your voice and your values are similar to the other people in the community in that your voice is heard.

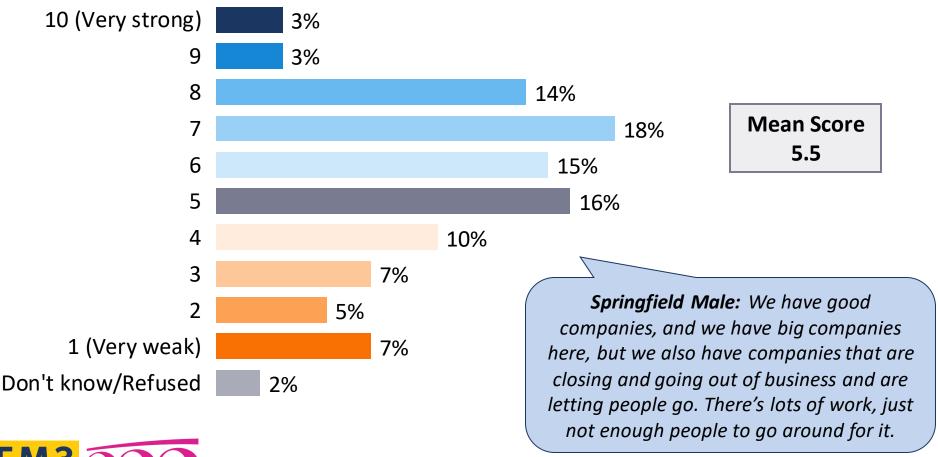




Views on the Economy and Financial Wellbeing

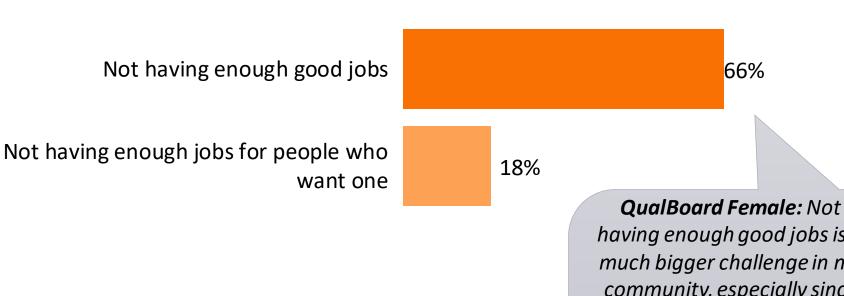
Respondents were modestly positive about the economy in their part of the state.

How would you rate the strength of the <u>economy in your part of Missouri</u> on a scale of 1 to 10, where a 1 means very weak and a 10 means very strong.



Two-thirds say not having sufficient *good* jobs is a bigger challenge than not having enough of them.

Economically, which is a bigger challenge in your community right now: not having enough jobs for people who want one OR not having enough good jobs?



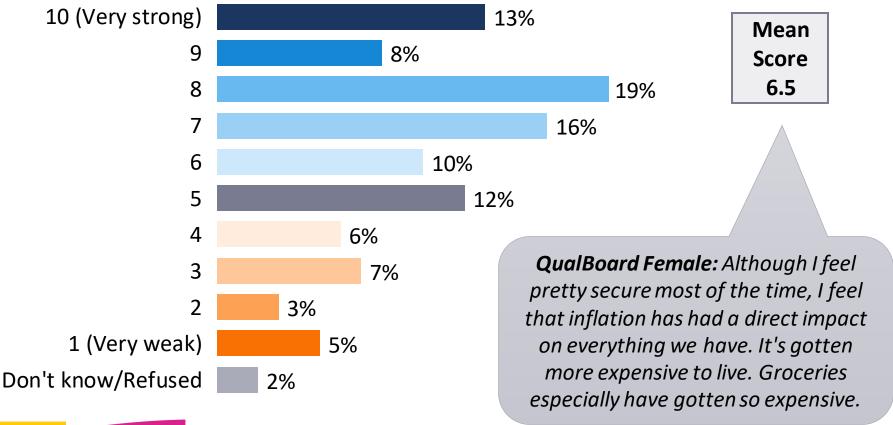
Don't know 16%

AuaiBoard Female: Not having enough good jobs is a much bigger challenge in my community, especially since COVID. Every restaurant is actively hiring but a minimum wage job without benefits (specifically health insurance) is not likely to be able to support a family.



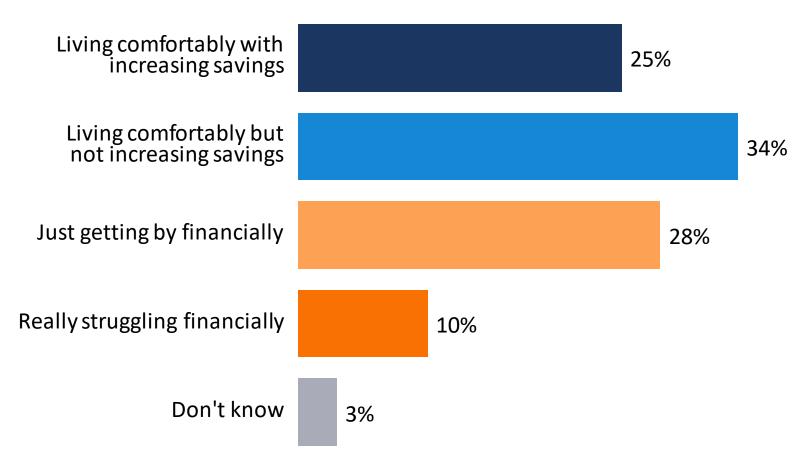
Missourians offer more positive evaluations of their own personal financial situations than of the state.

How would you rate the financial security of <u>your own household</u> on a scale of 1 to 10, where a 1 means very weak and a 10 means very strong?



Most Missourians say they are living comfortably, but only one-quarter are able to save.

More generally, which of the following best describes your financial situation:





BIPOC respondents are more likely to say they are "just getting by" than are white Missourians.

| | All | R | ace/Ethnicity | / | Househo | ld Income |
|---|------------------|----------------------|---------------|-----------|-----------|-----------|
| Response | Residents Whites | African Americans | All BIPOC | <\$50,000 | \$50,000+ | |
| Living comfortably with increasing savings | 25% | 25% | 21% | 23% | 8% | 36% |
| Living comfortably but not increasing savings | 34% | 36% | 28% | 26% | 25% | 42% |
| Just getting by financially | 28% | 26% | 31% | 35% | 44% | 18% |
| Really struggling financially | 10% | 9% | 15% | 13% | 21% | 4% |
| Don't know | 3% | 3% | 4% | 3% | 1% | 1% |



Those living with a disability are more likely to be just getting by financially or struggling.

| Response | All Residents | Gender | | Living With a Disability | | LGBTQ+ | |
|---|------------------|--------|-------|--------------------------|-----|--------|-----|
| | | Men | Women | Yes | No | Yes | No |
| Living comfortably with increasing savings | 25% | 29% | 20% | 14% | 29% | 22% | 25% |
| Living comfortably but not increasing savings | 34% | 34% | 35% | 28% | 37% | 32% | 35% |
| Just getting by financially | 28% | 27% | 30% | 38% | 25% | 30% | 28% |
| Really struggling financially | 10% | 7% | 13% | 20% | 7% | 15% | 10% |
| Don't know | 3% | 3% | 2% | 1% | 3% | 1% | 2% |



Participants in the qualitative sessions viewed costs and the affordability of basic expenses as the main indicators of the strength of the economy.

- Across the focus groups and the QualBoard, participants said the cost of basics and the amount of money people can afford to save after expenses were the most important metrics of the strength of the economy.
- Macroeconomic indicators, like unemployment rates and the stock market were less frequently seen as reliable measures of economic strength.

QualBoard Female: The ability to afford basic expenses, because as a mom of five kids it's too expensive to work and it's too expensive to stay home. The cost of groceries, gas etc. because everything is getting more expensive and pay isn't increasing. We have to work two jobs to keep up and still have to afford gas to go grocery shopping and soccer and school events.

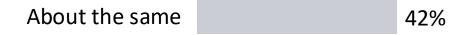
St. Louis African American:
Prices are going up - food and utilities, and it makes it hard for people. Jobs, they aren't paying enough. Everything else is going up and you are not really making enough money is how I look at it.



One-third of Missourians say they are worse off than they were a year ago.

Would you say you are better off, or worse off financially than you were a year ago, or is your financial situation about the same?







Don't know 1%



Unemployed

Clay County

Ages 40-49

Have Teen Children

Not Registered to Vote

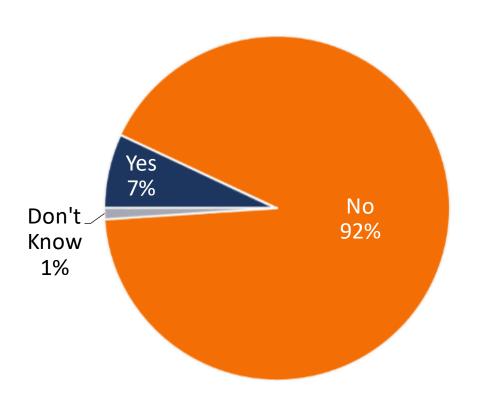
Household Size 4+

Uninsured



Nearly one in ten have faced eviction or the loss of housing in the past year.

Over the past year, have you faced eviction or loss of housing because you could not afford your monthly rent or mortgage?



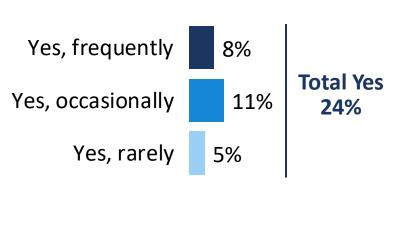
Renters, independents who are female or under 50, those living in the City of St. Louis and African-Americans were most likely to have had these experiences.

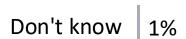


One-quarter have been unable to afford food at some point in the past year.

75%

Over the past year, have you at any time been unable to afford enough food to meet the nutrition and dietary needs of you or your family?





No

Demographic Groups Most Likely to Have Been Unable to Afford Food

Unemployed

HH Income Under \$50,000

Uninsured

Renters

Independent Women

Live with a Disability

Independents Ages 18-49

Live with Friend/Family

Women Ages 18-49

Paducah Media Market

Non-College Educated Women

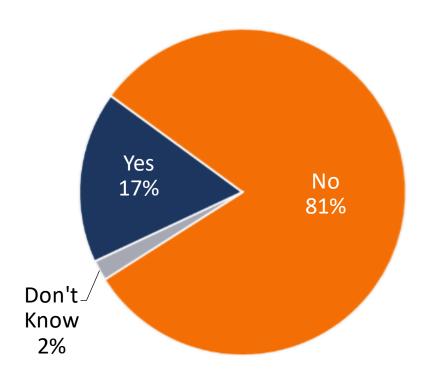
Single-Person Household

LGBTQ+



Nearly one in five have experienced involuntary unemployment in the past year.

Over the past year, have you experienced unemployment at a time when you wanted to be employed?



Demographic Groups Most Likely to Be Unemployed

Unemployed
Live with Friend/Family
Interviewed in Spanish
St. Louis City
IH Income Under \$30,000

HH Income Under \$30,000

Household Size 4+

Uninsured

Independents Ages 18-49

Independent Women

HH Income <\$50,000

Renters

Under Age 30

Live with a Disability

Independents

Not Registered to Vote

LGBTQ+



Participants in qualitative research widely agreed that a strong local economy benefits both a community's health and their personal health.

- Participants saw a clear connection between a strong local economy, good jobs, access to healthcare and the ability to afford food and housing.
- They also noted that financial instability and living in unsafe neighborhoods could lead to physical and mental stress.

Springfield Male: Your financial security is probably one of the number one drivers of mental health issues. You are financially secure, [you have] so much less stress, so much less frustration.

QualBoard Male: A strong local economy begets many job opportunities, full employment, and a generally optimistic populace. Optimism is essential to mental health. Mental health, in turn, boosts physical health.

Hannibal Male: If you're living paycheck-to-paycheck, and you pay the rent, pay the lights and gas, and you put fuel in the car, and now you're just trying to get to Friday and you've got \$30 in your account, you're not going to be able to go to Whole Foods and...plan on grilled chicken the rest of the week. You're going to be going to the generic aisle and getting the generic Reese's Peanut Butter Cup cereal for \$2 a box now.

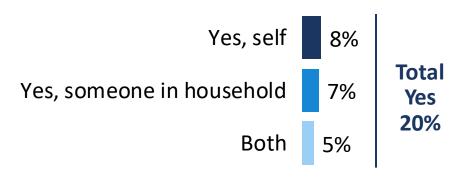




Experiences with Health and Healthcare

One in five have been without health insurance at some point in the last year.

Over the past year, have you or someone in your household been without health insurance coverage?





Don't know 1%

Demographic Groups Most Likely to Have Been without Insurance Coverage

Currently Uninsured

Interviewed in Spanish

LGBTQ+

Under Age 30

Lived 11-20 Years In Missouri

Independents Ages 18-49

Household Size 4+

Renters

Not Registered to Vote

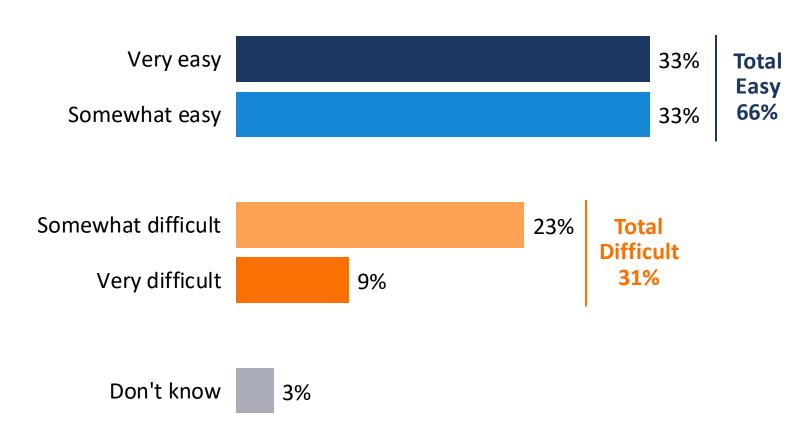
HH Income Under \$30,000

Live with Friend/Family



Two-thirds say it is easy to find care for <u>physical</u> health in their community.

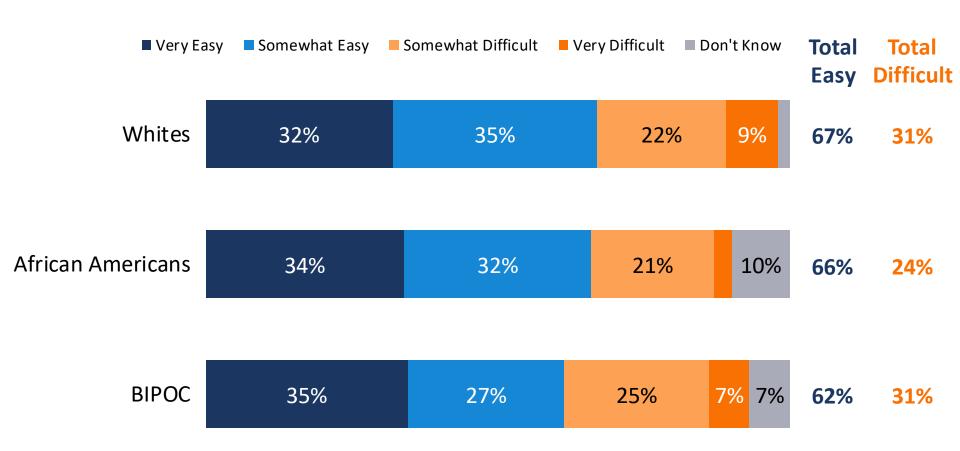
Is it easy or difficult to find or obtain care for your or your family's <u>physical</u> health in your community?





Perceptions of the ease of accessing physical healthcare cut across lines of race and ethnicity.

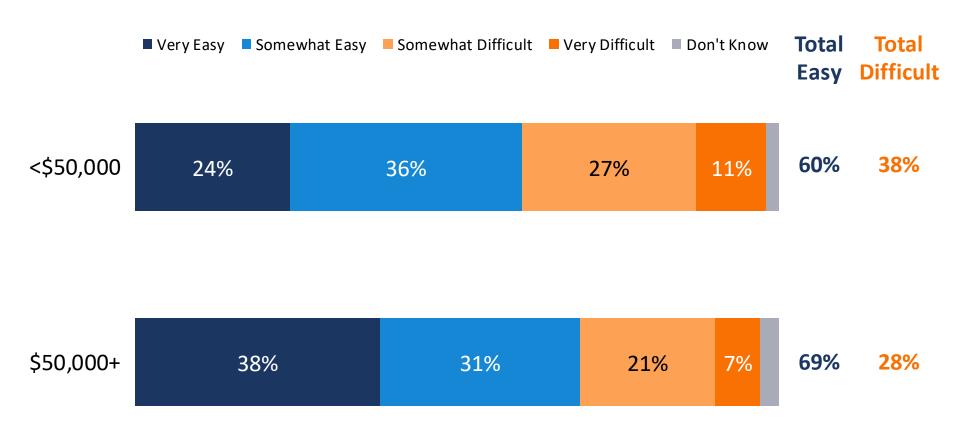
by Race/Ethnicity





Those with higher incomes are more likely to say it is easy to get physical healthcare.

by Household Income





Those with higher levels of educational attainment are also slightly more likely to say it is easy to get physical healthcare.

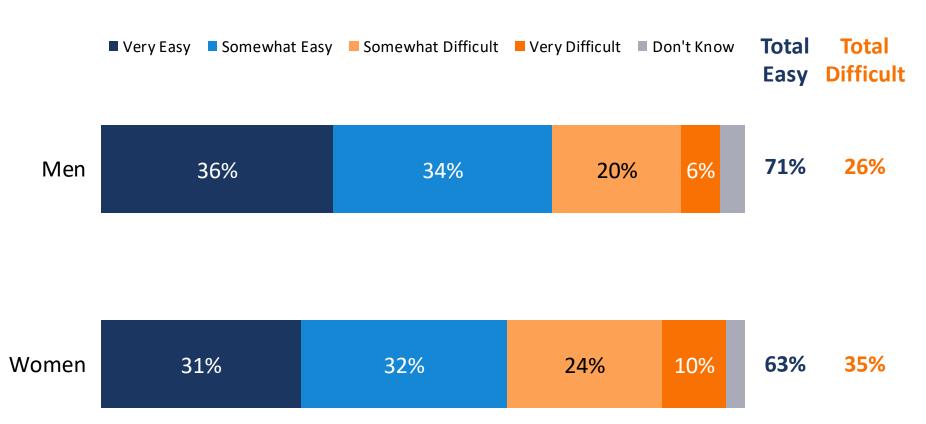
by Education





Men are more likely than women to say it is easy to get physical healthcare.

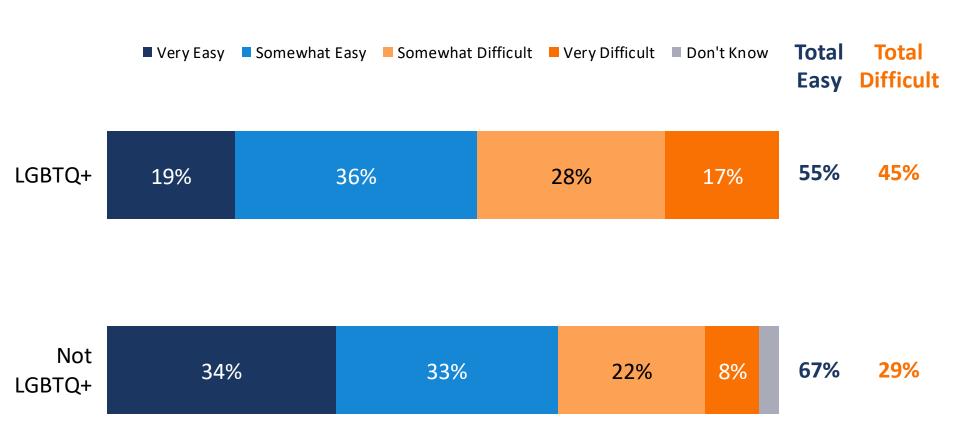
by Gender





LGBTQ+ Missourians are more likely to say it is difficult to get care than are non-LGBTQ+ residents.

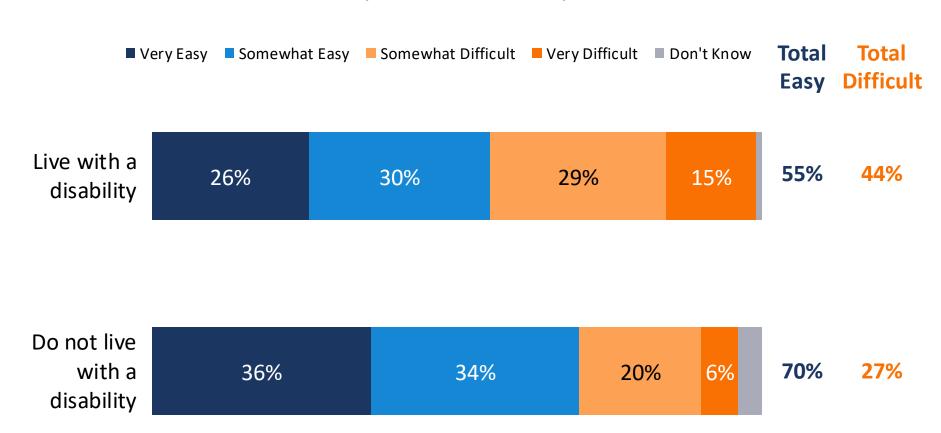
by LGBTQ+





Those who live with a disability are more likely to say it is difficult to get care than those who do not.

by Live With a Disability





QualBoard participants felt that accessing medical care in rural areas was more challenging.

QualBoard Woman: Small towns are limited to certain providers or not any providers. You have to travel 30-plus minutes to find some, and some people can't afford that or don't have a way to get to the doctor. Mental health is worse because the nearest psychologist is 45 minutes away.

QualBoard Woman: There are very little doctors in my area and there are none in my town that take my children's Medicaid, so I have to leave my community to get my kids' health taken care of.

QualBoard Man: It was easy, but now that my insurance coverage has changed, it's going to be less convenient. My primary-care provider is located in another town, and I don't have a license or a vehicle to drive. QualBoard Woman: While it IS easy, it's also very expensive. We have plenty of doctors offices and urgent care clinics, but good luck getting into see a doctor at one of these locations and if you do get an appt, you will for sure have to pay for it financially!



Costs pose the biggest challenge to accessing care, according to focus group participants.

- Participants in all eight focus groups ranked costs as the biggest challenges to getting care.
- BIPOC participants in Cape Girardeau were more likely than others to say that providers' lack of understanding of patients' language or culture was a barrier.

| | Number of Focus Group Participants | | | | |
|---|------------------------------------|--------------------|--------------------|--|--|
| Challenge | Major Challenge | Minor Challenge | Not a Challenge | | |
| High cost of care | 61 | 7 | 1 | | |
| High cost of insurance premiums | 55 | 12 | 2 | | |
| High deductibles/copays | 51 | 15 | 4 | | |
| Lack of available appointments when you need them | 26 | 30 | 13 | | |
| Don't feel comfortable getting care for certain health issues | 21 | 19 | 29 | | |
| Lack of medical providers in your community | 15 | 22 | 32 | | |
| Transportation to appointments | 13 | 29 | 26 | | |
| Too busy and can't get away to go to the doctor | 13 | 27 | 28 | | |
| Poor quality medical providers or care | 9 | 33.5 | 27.5 | | |
| Lack of convenient locations or hours | 9 | 25 | 35 | | |
| Medical providers don't understand the language or culture of local residents | 8 | 21 | 41 | | |



Verbatim Comments on Healthcare Costs from Qualitative Research

QualBoard Female: My husband and I have decent health insurance through his employer, which I am grateful for. However, the medical bills can still be high. We have savings but if a medical expense comes up, it's always painful to pay that expensive bill. We want to start a family eventually and I know we will have to save money just to pay for the hospital bills.

QualBoard Female: The biggest concern I have is the possibility of losing my health care. I wouldn't be able to afford to stay alive.

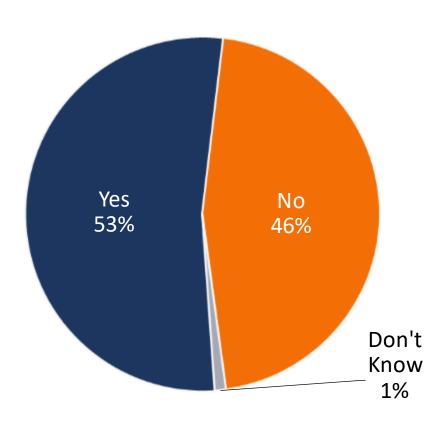
St. Louis Male: The medication I take, without insurance, would cost \$1,600. How is that even possible?

Springfield Male: I'm on Medicare now. I got on it six months ago. I have not had anything major, but I was on private insurance, so my employer. I retired back in June. So I'm changing over and am just finding out the nuances about how it all works, but so far it's been good. One thing is covered and the next thing costs me an arm and a leg.



Half of Missourians have experienced mental health strain in the last year.

In the last year, have you experienced mental health strain such as anxiety, depression, loneliness, or stress that affected your daily life?

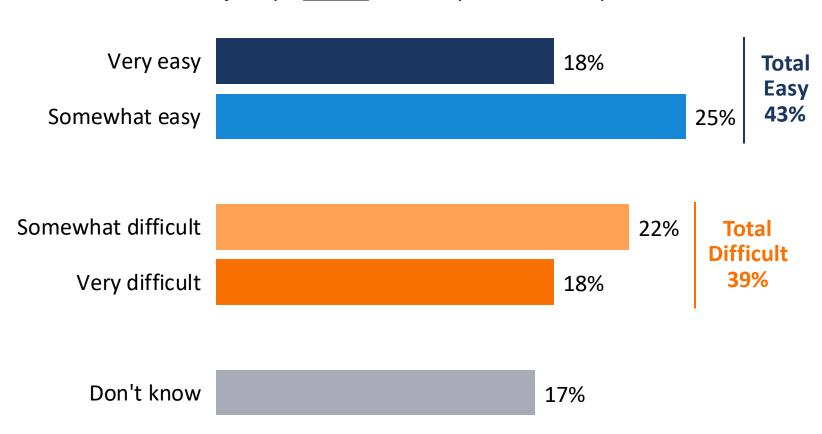


Those most likely to report experiencing mental health strain include:

- LGBTQ+ Missourians
- Democrats under 50
- Unemployed
- Women under 50
- Those living with disabilities
- Missourians under 30

Respondents are divided in their views on how easy it is to get mental healthcare.

Is it easy or difficult to find or obtain care for your or your family's mental health in your community?





Perceptions of the ease of access to mental healthcare cut across racial and ethnic lines.

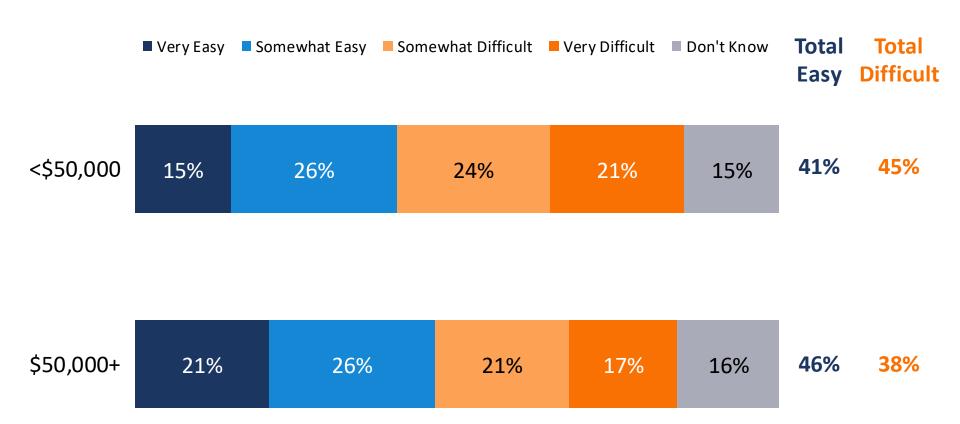
by Race/Ethnicity





Higher-income respondents are only modestly more likely to say it is easy than those with lower incomes.

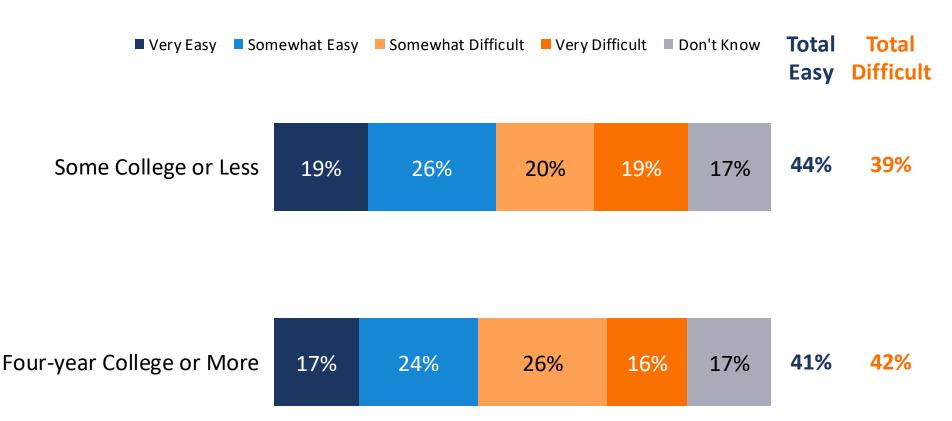
by Household Income





There is little difference in ease of access to mental healthcare by education level.

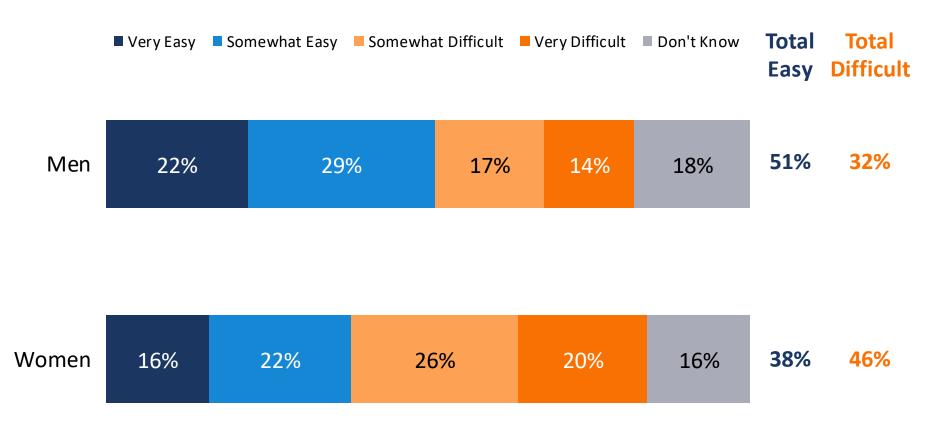
by Education





Men are much more likely to say it is easy to get mental healthcare than are women.

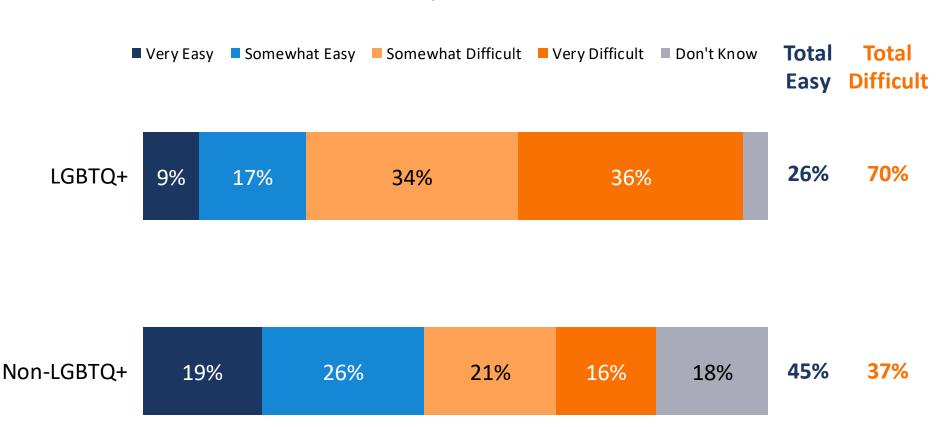
by Gender





LGBTQ+ respondents are nearly twice as likely to say it is difficult to find mental healthcare.

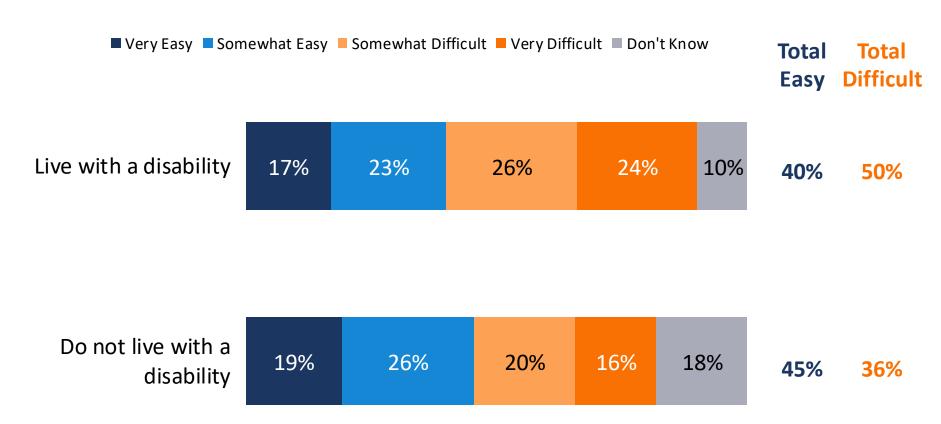
by LGBTQ+





There is little difference in the experience of accessing mental healthcare by disability status.

by Live With a Disability





QualBoard participants were divided on how easy it is to access mental health care in rural areas.

- Challenges in accessing mental health care included cost, insurance coverage, availability of providers and distance to get care.
- In the QualBoards, few mentioned stigma, but logistical barriers were mentioned more often.
- However, participants in BIPOC focus groups noted stigma about seeking mental health treatment.

Springfield Female: I think there is also more stigma for mental health for men than there is for women... I think as a society, we still have a hard time talking about feelings and emotions.

QualBoard Male: I don't have a problem getting an appointment at the VA hospital, but it will usually be in the 3-6 months time range for available appointments. So timing and drive time are difficult for me.

QualBoard Female: It is very difficult to find and get care for mental health in our community. There is only one hospital within 30 minutes that has a behavioral unit. Male counselors that boys typically like to talk to are hard to find and have long wait lists for appointments.





Health Equity and the Social Determinants of Health

Participants agreed that not everyone has the same opportunities to be healthy or receives the same quality of care.

- Participants noted a wide range of circumstances that could affect one's ability to stay healthy and obtain healthcare ranging from income, gender, and sexuality to whether they live in an urban or rural area.
- QualBoard participants thought that those living in rural areas had fewer opportunities to be healthy than those in other areas of Missouri.
- While only a few had firsthand experiences with discrimination in a healthcare setting, they acknowledged it was a problem.
- Procus group participants related stories of people having their concerns dismissed by providers based on cultural assumptions, or noted how language barriers could discourage both patient and provider from fully and effectively collaborating on care.

QualBoard Female: I know that race...has led to major differences in treatment. I have read several articles that discuss the different ways that people of different races are treated. I am thankful that I have not experienced that myself but it's disgusting that the color of someone's skin would change how they are treated.

St. Louis Female: I watched sometimes how doctors treated [my father] because he was a Black guy versus going to the doctor with my mom who is a white woman. They treated her different. They sometimes treated her better.



The concept of "health equity" was unfamiliar to participants in the qualitative sessions.

- In the focus groups, participants were uncertain about the term "health equity;" some connected it to financial equity and assumed it meant having savings to pay for healthcare.
- In the subsequent QualBoard sessions, the discussion was broken down further, into whether people have a "right to be healthy" and whether Missouri had a responsibility to close gaps in health.
- While there was general agreement on the concept that everyone should have opportunities to be healthy, participants were mixed on this topic and found it too abstract.
- Many also attributed health fundamentally to personal choices; even if they supported societal efforts to improve health and healthcare, they viewed it as primarily a personal responsibility.

Cape Girardeau BIPOC: I think of ways to take advantage and make some money because I'm healthy. I would build that equity in my health, like you build equity in your home. So how can I draw that equity down to feed my family.

QualBoard Female: I think that Missouri has government food programs that can help people be healthy, but they have to choose to buy healthy items.



Participants viewed health as something they had control over and a matter of personal choice.

- Most participants, both in the focus groups and QualBoards, felt that their health was primarily a matter of their own choice, rather than factors outside their control.
- They acknowledged the importance of a person's environment and genetics, but majorities felt that their own decisions about what they ate, how much they exercised, how much they slept, and how they managed stress were up to them.

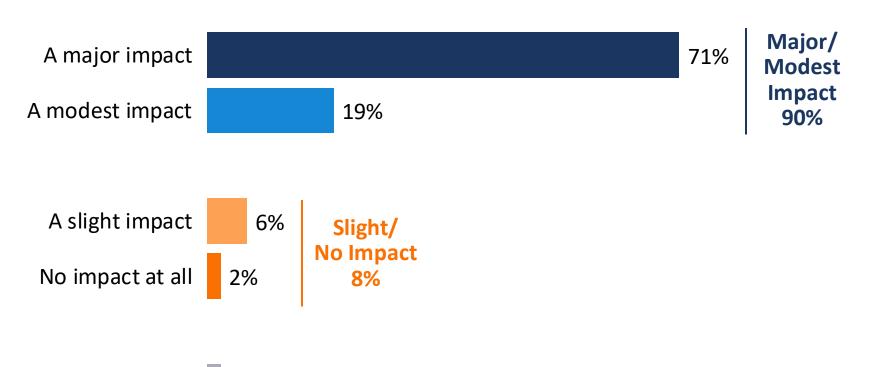
QualBoard Female: I have mostly control over being healthy; by that I mean I make the choices to eat healthy, to exercise and keep stress free. I have to make those choices for my children also, but at the same time companies like fast food ones make it hard; adding sugar to everything that companies make also makes it hard.

Hannibal Female: I see it as I have decisions to make, like I have control to make healthy decisions. I used to be a smoker; I chose not to smoke anymore. I choose not to drink to excess. I try to make healthier choices; I eat an apple instead of a processed snack. I choose to move my body and to do that. Now am I genetically pre-dispositioned for some things? Yes. But I think yes, I have control over my own health.



At the same time, seven in ten believe social determinants significantly impact a person's health.

Some people say that factors in society and their community can impact on a person's health: these include things like a person's household income; level of education; access to well-paying jobs or jobs that are not physically straining; quality housing; adequate retirement funds; and the amount of family stress. In general, how big an impact do you think that these factors have on a person's health:





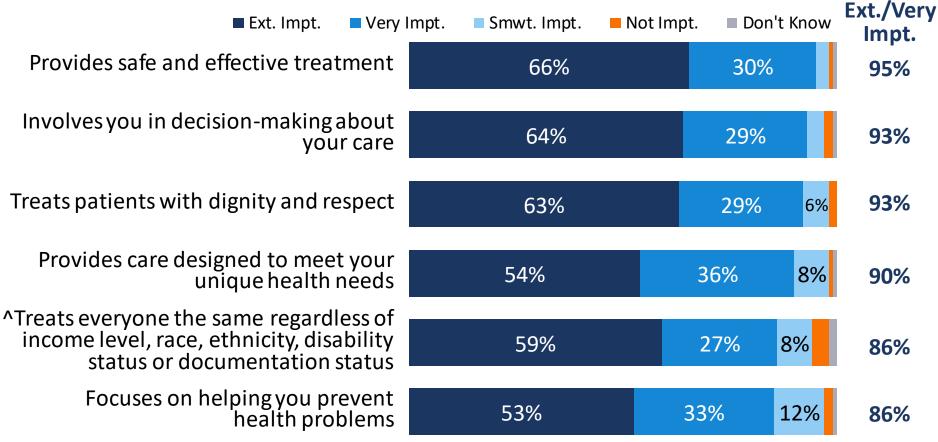
Don't know



Improving Health in Missouri

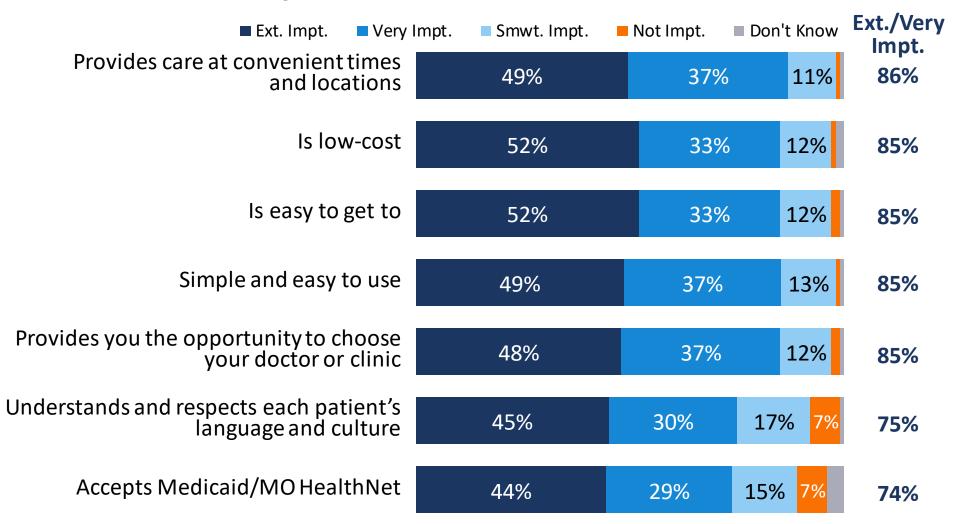
Missourians view safe and effective treatment, involvement in decision making, and dignity and respect as most important to high-quality healthcare.

Here is a list of possible characteristics of high-quality healthcare. Please tell me how important it is to you that healthcare in Missouri have that characteristic: extremely important, very important, somewhat important, or not important?





Convenience and cost are also highly important to Missourians.





African-Americans assign greater importance to all characteristics, but particularly being treated with dignity and respect.

| | Extremely Important | | | | |
|--|---------------------|----------------|----------------------|-------|--|
| Characteristic | All | Race/Ethnicity | | | |
| | Residents | Whites | African Americans | BIPOC | |
| Provides safe and effective treatment | 66% | 65% | 76% | 67% | |
| Involves you in decision-making about your care | 64% | 64% | 75% | 68% | |
| Treats patients with dignity and respect | 63% | 63% | 81% | 65% | |
| ^Treats everyone the same regardless of income level, race, ethnicity, disability status or documentation status | 59% | 57% | 75% | 64% | |
| Provides care designed to meet your unique health needs | 54% | 54% | 70% | 56% | |
| Focuses on helping you prevent health problems | 53% | 53% | 66% | 53% | |
| Is easy to get to | 52% | 50% | 69% | 61% | |
| Is low-cost | 52% | 51% | 64% | 57% | |
| Provides care at convenient times and locations | 49% | 47% | 68% | 56% | |
| Simple and easy to use | 49% | 47% | 68% | 56% | |
| Provides you the opportunity to choose your doctor or clinic | 48% | 46% | 67% | 57% | |
| Understands and respects each patient's language and culture | 45% | 45% | 57% | 47% | |
| Accepts Medicaid/MO HealthNet | 44% | 41% | 65% | 58% | |



Q29. Here is a list of possible characteristics of high-quality healthcare. Please tell me how important it is to you that healthcare in Missouri have that characteristic: extremely important, very important, somewhat important, or not important?

^Not Part of Split Sample

Women with a college degree are especially likely to view these characteristics as highly important.

| | | | • | | | |
|--|---------------------|-----------------------------|----------------------|-----------------------------|----------------------|--|
| | Extremely Important | | | | | |
| Characteristic | All Residents | Men | | Women | | |
| Characteristic | | Non- College Educated | College- Educated | Non- College Educated | College- Educated | |
| Provides safe and effective treatment | 66% | 59% | 57% | 69% | 83% | |
| Involves you in decision-making about your care | 64% | 55% | 59% | 71% | 76% | |
| Treats patients with dignity and respect | 63% | 54% | 59% | 70% | 74% | |
| ^Treats everyone the same regardless of income level, race, ethnicity, disability status or documentation status | 59% | 50% | 54% | 65% | 72% | |
| Provides care designed to meet your unique health needs | 54% | 46% | 51% | 61% | 62% | |
| Focuses on helping you prevent health problems | 53% | 41% | 52% | 61% | 62% | |
| Is easy to get to | 52% | 43% | 46% | 62% | 58% | |
| Is low-cost | 52% | 50% | 35% | 57% | 58% | |
| Provides care at convenient times and locations | 49% | 43% | 34% | 56% | 61% | |
| Simple and easy to use | 49% | 43% | 34% | 53% | 67% | |
| Provides you the opportunity to choose your doctor or clinic | 48% | 43% | 37% | 53% | 63% | |
| Understands and respects each patient's language and culture | 45% | 35% | 34% | 52% | 61% | |
| Accepts Medicaid/MO HealthNet | 44% | 34% | 43% | 58% | 43% | |



Q29. Here is a list of possible characteristics of high-quality healthcare. Please tell me how important it is to you that healthcare in Missouri have that characteristic: extremely important, very important, somewhat important, or not important? ANOT Part of Split Sample

Better healthcare coverage and lower costs are named the most important changes to improve health.

In a few words of your own, what is the most important change you think could be made to improve the health of all Missourians?

(Open-ended)





Verbatim Comments on Improving Health in Missouri

I think it should be required that people on Medicaid should have a doctor and not use a hospital as their doctor. I would say less government. If we have a more free-market system, that will help.

The cost of all health care needs to come down. Health care is too expensive.

I would say to increase resources for social programs such as access to transportation in rural areas.

a more stable economy. It causes a lot of stress for people. Stress is really bad.

It would be better to have more mental health providers in Missouri. They should be treating mental health the same as physical health, insurance-wise, because it is frustrating that they tend to stop at the mechanics.

Universal health or an expansion of people that qualify for Medicaid benefits.

I want an increase in access to all types of health care, like Medicare. In all situations, health care should be low-cost, and we can easily get appointments that are scheduled soon and not months out.





Making Change in Missouri

Volunteering, attending government meetings in person and meeting with elected officials were rated the most effective ways to better the community by participants in qualitative sessions.

Here is a list of ways someone could be involved. For each one, please indicate if you think this is very effective, somewhat effective, somewhat ineffective, or very effective at making a positive difference in the community.

| Top Ways to Get Involved | Number of Participants Who Chose These As Effective | | |
|---|--|---------------------|--|
| | QualBoards | Focus Groups | |
| Volunteering time for an organization active in the community | 22 | 68 | |
| Taking time off from a job or school to work to volunteer time for a cause you really believe in | 21 | 59 | |
| Attending a meeting of a government agency, such as a city council, planning commission, or school board | 21 | 59.5 | |
| Meeting personally with an elected official | 20 | 50 | |
| Making decisions about your diet, housing, or lifestyle based on your values | 19 | 57.5 | |
| Signing a petition in person, such as at the door or in a parking lot | 17 | 43 | |
| Attending a protest, rally, or demonstration | 16 | 36 | |
| Donating money to an organization active in public policy | 15 | 53 | |
| Writing a letter to a public official | 15 | 26 | |
| Sending an email or other online communication to a public official | 14 | 25 | |
| Making decisions about whether or not to purchase something based on the values of the company that made it | 12 | 44 | |



Comments on the Most Important Change to Improve Life in Missouri

QualBoard Female: I think some form of affordable public transportation is the most important need for my community. Affordable public transportation would allow the elderly and handicapped to get to the store, the doctor, church services, and socialization opportunities. Young people would be able to get to places of employment without the added stress on a parent with the family car.

QualBoard Female: The drug/opioid crisis needs to be tackled head on, zero tolerance. This is the source of most crime and mental illness, as well as physical illness.

Cape Girardeau Feamle: Police officers being able to do their jobs without fear of losing their job so that crime is down.

Making healthcare cheaper so more people are able to get access to healthcare.

Hannibal Male: Personal outreach in awareness and seeking common ground to help one another as individuals and as a community.

Springfield Male: The housing of the homeless, and increased opportunities to improve the lives of the homeless would effect the overall crime rating of the community, as well las making health coverage more affordable.



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